

NAME		REQUESTED EFFECTIVE DATE	
[REDACTED]		10 Dec 51	
NATURE OF ACTION		WHEN LEAVING (VOUCHERED)	
Consultant (Intermittent)		LAST WORKING DAY:	
FROM		EMPLOYEE'S SIGNATURE:	
TITLE		TO	
GRADE AND SALARY		Intermittent Consultant	
OFFICE		\$50.00 per consultation	
DIVISION		DD/P	
BRANCH AND SECTION			
OFFICIAL STATION		Washington, D. C.	
DEPARTMENTAL <input type="checkbox"/> FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>	
REMARKS:			
to be paid thru OPC funds.			
RECOMMENDED:		STATINTL	
DEC 6 1951 (DATE)		[REDACTED] (SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF OR ADM. OFFICER)	
FOR USE OF PERSONNEL ONLY			
PLACEMENT		TRANSACTIONS AND RECORDS	
DATE QUALIFICATIONS APPROVED		APPROPRIATION:	
CLEARANCE REQUESTED		ALLOTMENT:	
DATE TYPE		C. S. C. AUTHORITY:	
DATE TYPE		DATE SIGNATURE SIGNATURE	
DATE SIGNATURE		PERSONNEL RELATIONS	
CLASSIFICATION		DATE SIGNATURE	
BUREAU NO. C. S. C. NO. DATE APPROVED		APPROVALS	
NEW VICE I. A. REAL		<input type="checkbox"/> SUBJECT TO SECURITY CLEARANCE	
DATE SIGNATURE		DATE SIGNATURE OF EXECUTIVE	
EFFECTIVE DATE		DATE SIGNATURE OF DIVISION CHIEF	